

**Department of the Interior
National Park Service
Chesapeake & Ohio Canal National Historical Park
Commercial Use Authorization Report Form**

Park Name: C&O Canal National Historical Park Attn: Leigh Zahm fax ☎(301) 745-3337

Permittee Name: _____

Company Name: _____

Address: _____

Expiration Date: _____

CUA Number: _____

1. What service(s) do you provide the park visitor?

2. How many visitors do you serve per year within the park area?

3. How much time do you or your customers spend in the park (days/hours)? _____

4. Is the park or its resources a primary or exclusive destination?

5. Is the park only incidental to the service you provide? (Please Circle) Yes No

If the answer is yes, please answer why?

6. What percent of the activity takes place in the park overall?

7. What are the annual gross receipts generated as a result of being in the park?

8. How is the answer to number 6 calculated?

